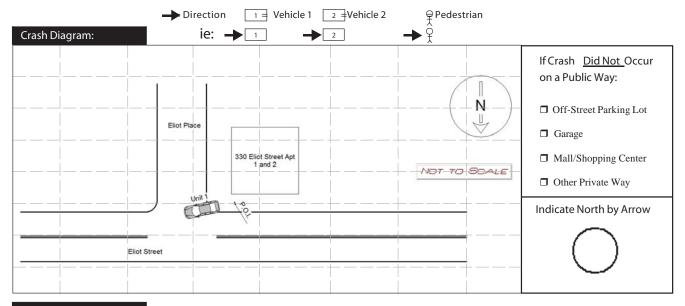
	Poli	ce Use Only		Common	ıwealtl	h of	f Massa	ach	use	tts			RMV	/ Doci	ıment	t Number	
	Date of Crash 10/15/2019	Time of Crash 22:21	City/To NEWTON	wn M	otor V	ehic	cle Cra	sh			Number Injured		ed Limi tude		St Lo	ate Police ocal Police BTA Police	XI
	10/10/2019	24HR					eport		1		0		gitude_		Ot	ther:	
		AT INTER	RSECTION:	<	LO	CATI	ION :	>			NOT	AT	INTI	ERSE	CTI	ON:	_
							EAST	33	30	1	ELLIOT	ST					ŀ
	Route# Direc	tion	Name of	Roadway/Street		Ro	oute# Direction	on A	Address	#		Naı	me of R	Coadwa	y/Stre	et	
	At						Feet NSEW of or									ŀ	
	Route# Direc	tion N	Name of Intersecting	g Roadway/Street		- -		1 2 2	3 0.		Mile M	arker		OI	Ex	cit Number	
			Also at Inter			- -	Feet [N S I	E W of		Route#		ntarcac	ting Do	o duvo	y/Street	- [
						-	Feet [N S I	E W of		Koute#	1	intersec	tilig Ko	auway	y/Silect	
	Route# Direc	tion	Name of Interse	cting Roadway/Street						-			Laı	ndmark			
	XVehicle1	#Occupants	X Hit/Run	Moped	Case Num	ıber			190000	1048							
	License#		St M.	A DOB/Age	R	eg # <u>8</u> L	. Z 179				Reg Ty	e PAN	N	Re	σ State	. MA	
	Sex_F Lic. 0	18 1		19		-	r_2004								-	20	_
_			ELIZABETH	Endorsn	nent		(Same as oper							VOIC	omig.		ŀ
	Operator MU	Last VERMORE RD	First	Middle			Las	t			First			Midd	ile		-
	City WELLES			nte_MA _ Zip_02481											7:		-
	'		MENT EMPLOY			-	Action Prior to			21					-	e Up to Thr	- 1
_										10	22 2	umge	3	coue.	(o op to riii.	
				oonding to Emergence			equence 97 2	,	23				\bigcap	\overline{A})	10 Undercarr	iage
		ssued) T2079291					rmful Event	97	24	1	24 1	←	9			11 Totaled	
				2: ChSec			Contributing Co		20				7	<u> </u>) 6		
	Violation 3: ChSec Violation 4: ChSec Uno Please fill out for operator and all occupants involved						le/Override	I	T	owed _		20	21	22	22		_
	Name (Last Fir		ator and all occu	pants involved Addres	ss		Age/DOB	Sex	26 Seat S Pos. S	27 afety Ai ystem S	28 29 irbag Airba tatus Switc	g Eject h Code	31 Trap Code	32 Injury 1 Status	33 Transp. Code	Medical Facili	ity
	Operator			See Abo	ve					99 9	9 99	0	0	10	1		
	Please Select C)no —			Г	14	1	5		16	1		17				
L	of the Followi	Vehicle	e# Occupan	ts Non-Motori	st A Type		Action	Lo	cation		Condi	tion		ľŪ⁺	Hit/Ru	n Mop	ed
	License#		St	DOB/Age	R	Reg # Reg Type Reg State						_					
	Sex Lic. (Class 18 1	Lic. Restriction	as 19 CDL _	V	Yeh Year Veh Make Veh Config.											
	Operator	·		Endorsn	nent O	wner _	Las										_
	Address	Last	First	Middle			Las	t			First			Mide	lle		
	City		Sta	ateZip	C	ity							_State		Zip_		
	Insurance Com					-	Action Prior to			21	D	amage	d Area	Code:	(Circl	e Up to Thr	ee)
	Vehicle Travel		S E W Res	sponding to Emergence						22	22 2		3		4		
		ssued)		, 3 ··gen			rmful Event	2	23		_ (_	$ \downarrow\downarrow$		- 1	10 Undercarr	iage
	· ·			n 2: ChSec			Contributing Co	ode [24	1	24	←	9		5	11 Totaled	
				n 4: ChSec			le/Override	L	25 To	wed_			7		6		
				occupants involve			ic, o verride	Π			28 29 irbag Airba	30	31 Trap	32 Injury	33		귀
	Name (Last Fi	rst Middle)		Addre	ess		Age/DOB	Sex	Pos. S	System S	Status Swit	ch Cod	e Code		Code	Medical Faci	lity
	Operator/	Non-Motorist		See Abo	ve					\perp							\dashv
										\perp		_					_
													1				



Crash Narrative:

Based on the witness statement of Yehor Shumerko, the operator of MV1 rolled down Eliot Street subsequently backing her vehicle into the foundation of 330 Eliot Street. Both tenants of the home then stated that they exited the home and when attempting to speak with operator she appeared distraught and begged them not to call the police before then leaving the scene without providing any information. Both occupants of the home were uninjured. Fire responded and determined that the home was safe for the time being. Wellesley PD attempted to locate the owner of the vehicle at her residence with negative results.

Photographs of the scene were taken and submitted to IT to be attached to this report.

Massachusetts Uniform Citation T2079291 was issued via mail to the operator of MV1 for 90-24, Leaving the scene of property damage.

(Continued on next page)

Witnesses:			
Name (Last, First, Middle)	Address	Phone #	Statement
	45 JACQUELINE RD		
SHUMERKO, YEHOR,	WALTHAM,MA 02452		Y
	330 (apt 1) ELIOT STREET		
CHEN, GUANDO,	NEWTON,MA 02460		N

Truck and Bus Information: Registration #	(From Vehicle Section)	25
Carrier Name		Carrier Issuing Authority Code 35
Address	_ City	St Zip
US DOT #: State Number	Issuing State ICC #:	Interstate 36
Cargo Body Type Code 37 Gross Vehicle Weight 38		39
Trailer Reg #: Reg Type Reg State _	Reg Year Trailer Leng	
Hazmat Information:		
Placard 40 Material 1 digit # 41 Material Name	Material 4 digit #	Release code 42

HAGAI BRANDON		30619	NEWTON POLICE DEPARTM		10/15/2019
Police Officer Name (Please Print)	Signature	ID/Badge #	Department	Precinct/Barracks	Date

-	Direction 1	∃ Vehicle 1 2	+Vehicle 2	₹ Pedestr	Idli			
Crash Diagram:	ie: 🕕 🛚 1	2	_	₽Ŷ				
Crash Diagram:	ie: → 1			→ Ŷ		If Crash Did Not Coon a Public Way: Off-Street Parking Garage Mall/Shopping Ce Other Private Way Indicate North by A	t Lot enter	
			į	į		()		
Crash Narrative:								
Approximately 1 hour later	Officer Guarin	no located th	e operator of	f MV1 seve	ral streets	away on Columbi	ia Ave.	
She stated that she was sm	oked a cigarett	te when he ve	hicle began t	to roll ba	ckwards and	struck the hous	se. The	
operator of MV1 also state	d that she did	not believe	there was any	y damage t	o the home	which is why she	e left	
despite major damage to he	r vehicle. Tody	ys responded	to the scene	and towed	the vehicl	е.		
W/**								
W itnesses: Name (Last, First, Middle)		Address			Ph	one #	Statement	
		330 (apt 2) ELI	OT STREET					
GRANDPRE, SCOTT,		NEWTON,MA	A 02460				N	
Property Damage:								
Owner (Last, First, Middle)	Address	Phone # 34-Type D			Description of Damaged Property			
Truck and Bus Information:	Registration #		(From Ve	ehicle Section)			35	
Carrier Name					Carrie	er Issuing Authority Code	e	
Address			City		St_	Zip		
US DOT #:	State Number		Issuing State	ICC #:_		Interstate	36	
Cargo Body Type Code 37 Gros	ss Vehicle Weight	38						
Trailer Reg #:	Reg Type	Reg State	Reg Year	Tr	ailer I enoth	39		
Hazmat Information:	~~ 1/20		Rog real_	116				
40	41 Matarial N	íomo		Motorial 4	ligit#	Release code	42	
Placard Material 1 digit #	iviaterial N	a111C		iviateriai 4 (ngil#	is elease code		
						resease code		
HAGAI BRANDON		30619				10/15/20		

ID/Badge #

Department

Signature

Precinct/Barracks

Date

Police Officer Name (Please Print)